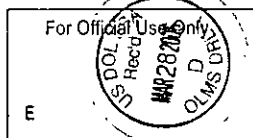


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0182  
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>9835</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2005</u> Through: <u>12</u> / <u>31</u> / <u>2005</u>
3. Name and address of person filing. Name <u>BARBARA A. CARROLL</u> P.O. Box, Bldg., Room No., if any <u>LINCOLN CENTER THEATER</u> Street <u>150 WEST 65 STREET</u> City <u>NEW YORK</u> State <u>NEW YORK</u> ZIP Code + 4 <u>10023 6916</u>	4. Name, file number, and address of labor organization. Name <u>ASSOC OF THEATRICAL PRESS AGENTS + MANAGERS</u> Labor Organization File Number <u>L4 18082</u> → <u>LM-049343</u> P.O. Box, Building and Room Number, if any Street <u>1560 BROADWAY</u> City <u>NEW YORK</u> State <u>NEW YORK</u> ZIP Code + 4 <u>10036 2501</u>
5. Position in labor organization. <u>BOARD OF GOVERNORS</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>DOUBT</u> Trade Name, if any: <u>c/o STUART THOMPSON</u> P.O. Box, Bldg., Room No., if any Street <u>1501 BROADWAY</u> City <u>NEW YORK</u> State <u>NEW YORK</u> ZIP Code + 4 <u>10036</u>	7. a. Nature of Interest, Transaction, or Income. <u>TONY VOTER TICKETS X2</u> 7. b. Amount. <u>\$ 200.</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>Barbara Carroll</u>	On <u>3/20/06</u> <u>212-501-3201</u> Date Telephone Number

# DOUBT

WALTER KERR THEATRE 219 WEST 48TH STREET JULIAMCYN THE DOUBTERS 8:00 PM THU APR 21, 2005 MAKER1132 0419 N165L		AKERDB042105E
*INCL \$0.00 RESTORATION CH COMPLIMENTARY		COMP \$0.00 * COMP CH
*INCL \$0.00 RESTORATION CH COMPLIMENTARY		ORCHO E 5 E 7

NO REFUNDS NO EXCHANGES

JULIAMCYN THEATERS

March 23, 2005

Dear Tony Voter:

We would like to invite you and a guest to attend a performance of **DOUBT** at the Walter Kerr Theatre, located at 219 West 48<sup>th</sup> Street.

**DOUBT** was written by John Patrick Shanley and directed by Doug Hughes. The cast includes Cherry Jones, Brian F. O'Byrne, Heather Goldenhersh and Adriane Lenox. The set was designed by John Lee Beatty, costumes by Catherine Zuber, lighting by Pat Collins and original music and sound design by David Van Tieghem.

Tony voters are invited to attend any performance of **DOUBT** April 12 through May 22, 2005:  
Tuesday through Friday evenings at 8:00 pm  
Wednesday and Saturday matinees at 2:00 pm  
Sunday matinees at 3:00 pm

To reserve your tickets for yourself and a guest, please telephone Pat Miller at (212) 768-8583 between 11:00 am and 1:00 pm. You must present valid I.D. to pick up your tickets. This invitation is non-transferable, and only requests from Tony Voters will be honored. Please note that seating may be limited at certain performances.

We look forward to seeing you at the Walter Kerr Theatre.

Sincerely,

  
CAROLE SHORENSTEIN HAYS

  
LYNNE MEADOW

  
BARRY GROVE

  
ROGER BERLIND

  
SCOTT RUDIN